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EDITORIAL COMMENT

PRIVATE DUTY NURSING

What is wrong with private duty nursing? Or is there nothing wrong? The letters sent us for publication, the articles written for private duty sections, the discussions heard at meetings and in private, all seem to show that private duty nurses are at present suffering undue hardships from which they should be relieved.

What are their grievances? They are enumerated thus: long hours of work, over fatigue, monotony, inadequate salaries, no opportunities for advancement in work or for self improvement, bearing the blame for doctors' mistakes, unnecessary and unappreciated self-sacrifice.

These topics would be excellent subjects for discussion at nurses' meetings, if only both sides are looked at squarely. The trouble is that when we get to pitying ourselves, we forget there is another aspect and dwell on the one which to us looms largest.

Private duty nursing has suffered from the campaign for hospital and training school executives and for public health nurses. So much emphasis has been laid on these branches as needing the very best nurses we have, that by inference, we might assume that private duty may be neglected or that the left overs from other lines of work would be acceptable here. This is not so. There is no one branch of nursing which is more important than any other; there is none which may safely be neglected. Women who graduate from schools of nursing have different kinds of aptitude and ability. Some are natural executives or teachers, some are born philanthropists with a fondness for the study of social conditions. For these the paths are plainly marked out. There are others who are born nurses, as well as trained nurses. It is their delight to go to a sick, uncomfortable, miserable, suffering creature and by their skill, intuition, sympathy, and understanding, transform his condition. They love the long fight from the dark hours of illness through to health. They can stick closely to the desperate case, keeping up any ray of courage or hope, making

every step of the way as comfortable as possible, never leaving their charge until death parts them. Such women are real nurses, whether working among the rich or the poor. They are sorely needed and they will always be needed. We cannot possibly do without them.

What can we do to make their pathway easier? The best of them are thinking of others, not of themselves; they are not the ones who speak of unappreciated sacrifice. They would say, if you asked them, that they were over appreciated. As a rule we get out of life what we put in,—brim full and running over.

The salaries of private duty nurses have been raised all over the country; it was right that they should be. Their expenses have gone up during the war and after it, as have those of other people. It is right for nurses' associations to consider fairly what a good nurse should command as pay for her services and to adopt a schedule which will make these rates definite, so that all may understand. These rates will always have to be like a speed limit, however. They should represent the maximum which may be charged by nurses sent out by an association or a nurses' directory. They should never represent what the nurse *must* charge. She should be free to charge less when circumstances demand it, and if she wishes to do so. There should be a wide margin for suiting the charges to conditions, both for the sake of the public and for the sake of the nurse. We cannot lessen the hours of duty and increase our rates, all at once, or we shall find that only millionaires can afford to have us care for their sick.

One way of helping people of the middle classes who cannot pay the high rates for all-day service is by the establishment of hourly nursing. We should have, in connection with each nurses' directory, a staff of nurses who do hourly nursing all the time or who are willing to do it while waiting for cases. This would cover part of the need of the community, but not all.

We should not look too enviously on the wages earned by washer-women and cooks and think that we should earn more, because we have greater ability and larger education. It is aggravating, indeed, but the same inequality applies between college professors and hod-carriers. Part of our compensation must lie, always, in the satisfaction of the work we are doing. The earnings of professional people are not now and may never be as large, in proportion, as are those of the day laborer.

What can we do about the long hours of private duty? Those, too, can be regulated by concerted action between nurses' associations, directories, and hospitals. Twelve-hour duty, where the nursing is continuous, is as needed in private duty as for student nurses. For special cases in hospitals, the rule of twelve-hour duty can be

established and maintained. For cases in homes, the process must be slower and must be largely a result of education. For acute illness in families of ample means, twelve-hour duty should be asked for and obtained. For people of moderate means and in cases where the nursing is not continuous, where there is little night work,—to demand twelve-hour duty might be very unfair, indeed, impossible. We must always adapt our requirements to the circumstances of the particular case.

What about monotony and the impossibility of advancement in nursing or other lines of work? To the real nurse, the one who is keenly interested in nursing and in humanity, there is no monotony. Each case is a new nursing problem, each patient is a new individual, each family forms a new world,—all keenly interesting and many most delightful. Nurses need two qualities which seem contradictory but which complement each other. They need such absorption in their work that while on duty their heart is there. They need such wide general interests that between cases they will find plenty to interest and occupy them, both for their own sakes and for their patients. It is not impossible for private duty nurses to take advanced courses, if they will plan for it, nor to enter other lines of nursing work if they prepare themselves properly for them. We know those who have done and are doing it.

Are private duty nurses blamed for the mistakes of physicians? That is a new topic for thought for us. It might be matched by another. Does the physician ever bear silently, as if it were his own, the blame for some error on the part of the nurse, rather than involve her? What we want to be sure of is that we are not at fault.

Next month we shall publish an article by Miss Maxwell describing the conditions which obtained when she had her training as a nurse in the early days of our training schools. At the close, she asks some questions which we ask all nurses to consider carefully, as to hardships, real or imaginary.

We believe if we could hear the voices of all the private duty nurses of the country, we should find many that are contented ones. Those who feel that their lot is an exceptionally hard one, should really try some other kind of nursing for a time. They might come back to their own corner better satisfied to count their blessings and to work reforms slowly.

We are not speaking theoretically, when we comment on the lot of the private duty nurse. Sixteen years of private duty nursing, most of the time on what is called twenty-four hour duty, made us proud of belonging to that branch of our profession.

"MISTAKEN METHODS FOR MEETING THE SHORTAGE OF NURSES"

Under this heading, last month, we commented on the proposed plan of the Wisconsin League of Nursing Education to provide for two classes of graduate nurses. We are glad to report that on further consideration, the League members have decided not to pursue this plan.

We can understand, in a way, the frantic efforts of unsuccessful schools to gain more pupils by lowering their standards, but it is inconceivable that a school which has always had students, and those of the highest class, which has been one to lead the way in progressive nursing education, should consider shortening its length of training and of curtailing its curriculum,—not because it is in need of students, but because members of the board of directors have decided this should be done. Cannot the alumnae association of such a school rise in protest? Possibly their voice would carry greater weight in such a case than does that of the nursing staff.

Or perhaps this school is destined to be an object lesson for the rest of the country. Possibly a general exodus from its doors of desirable applicants would prove what we believe to be true,—that a good school will attract students, and that a poor one cannot attract or retain them.

THRIFT

The Government is urging all good citizens to observe Thrift Week, January 17-23, by giving greater thought to their own systems of expenditure and by using their influence with others to put aside some portion of their earnings, regularly, toward the rainy day which is so likely to be on the horizon.

A budget is an almost indispensable aid to thrift,—for our organizations, and for ourselves as individuals. If we classify our income and our expenditures for the past year and then make a budget for the coming year, based on what we may expect to earn and on our necessary expenses, we shall be much more likely to have something to save, and something to share, than if we use our money as it comes, in a haphazard way. It is a very good thing to look back over our accounts at the end of each month and so keep ourselves continually reminded of how we have apportioned our income and how we are living up to that apportionment.

Some other topics for consideration during Thrift Week, beside that of budget making, are suggested by the Industrial Department of the Young Men's Christian Association, as follows: Life Insurance, Owning a Home, Making a Will, Paying Bills Promptly, and Sharing

with Others. All of these would form good subjects for discussion in alumnae meetings or in students' class meetings.

THE MEMORIAL FUND

We feel like beginning this comment with three cheers,—for the Memorial Fund of \$50,000 is completed. Not only that, but we have passed the goal. The JOURNAL is glad to have been able to act as treasurer and to have contributed, as its share, the clerical work, postage, and stationery needed for this office.

Miss Albaugh, who has been indefatigable in her efforts to bring the fund to the attention of nurses all over the country, asks space for a final word on behalf of the Joint National Committee, as follows:

The Memorial Fund for the Nightingale School at Bordeaux, France, is now oversubscribed and those responsible for the work of the accumulation of this Fund want to express their gratitude to the nurses and friends for their loyal support in this undertaking. Words of congratulation and appreciation have come to us from many sources, expressing heartily one opinion, that the response to this movement has been most wonderful, and characteristic of the American nurse.

The following is an extract from a letter recently received from Lyda Anderson, who is associated with Helen Scott Hay, at the Paris office of the American Red Cross Nursing Service, and while it gives only her personal impressions of the purpose and location of the Memorial to our nurses who died in the service of their country, we feel that it belongs to those who have made possible this tribute, and greatly illuminates the picture we have all carried in our minds:

"I made a trip to Bordeaux for the Committee one day last week, and I wish I could write a long story of my visit in this hospital and training school. If you only could see the perfectly beautiful grounds that have been given them for the nurses' home and a new hospital, very spacious, about sixteen acres, just on the outside of the city limits, beautiful old trees of many varieties, and the grounds so planned as to make you wish to go out there and live. I have seen the plans of the home for the Florence Nightingale School, and I have a picture in my mind now of this memorial, which is going to be so fit, and just what the American nurse will be tremendously proud of. The last word was that there were possibilities of the ground being broken at once for the school, and then it was thought that Miss Noyes might be present at the laying of the cornerstone."

THE RELIEF FUND

This is not a new plea for contributions, though we hope the Relief Fund may be the next to be augmented. However, we need to take a long breath before falling enthusiastically to the support of any new fund or even of an old and honored one. This is a plea for a better method of sending in contributions and of giving receipts. The country has now been so well mapped out in state and district associations, that it should be possible to do the Relief Fund work largely through our state committees. State chairmen of Relief Fund Committees are asked to work through the districts to collect funds, and to send

receipts to all donors. They should then send what they have received, in a lump sum, once a month, if possible, to the treasurer of the national committee, Mrs. C. V. Twiss. For years Mrs. Twiss has been sending individual receipts and notifications, until the work has grown so large that it is hard to keep up with it. We know the nurses of the country will be glad to help relieve her of this detail work by sending contributions through their state chairmen.

If you do not know who is chairman of your state committee, ask your state officers, or ask the secretary of the national committee. The official directory which appeared in the December JOURNAL should be kept for reference, as it may not be published again until March.

Many letters of inquiry have come to the chairman of the Relief Fund Committee, asking about "homes," boarding houses, sanatoria, etc., where nurses can be cared for who are ill, but not helpless, and who can pay from \$10 to \$20 a week. Will those who know of such places, send the addresses to Miss E. E. Golding, 317 West 45th Street, New York City?

BE SURE OF YOUR AUTHORITY

Our attention has several times been called to the fact that our national associations are being quoted at times as sponsors for undertakings with which they have no connection or of which they do not approve. We believe it must be ignorance, not deliberate misrepresentation, which causes officers of affiliated organizations to quote the higher body as authority for some measure they wish to put through. There is one way of making sure, and that is to refer the matter to the national officers whose addresses are published in the Official Directory of this JOURNAL every three months.

THE INTERSTATE SECRETARY FUND

M. Helena McMillan, Presbyterian Hospital, Chicago, is chairman of the Committee appointed by the League to secure funds for the continuation of the work of an interstate secretary. Miss McMillan asks that all state associations report to her at once what has been done in this matter, stating the amount of money raised or to be raised, so that she may make a report at the January directors' meeting.

ANOTHER JOURNAL INCREASES ITS PRICE

The Pacific Coast Journal of Nursing has been obliged to raise its subscription rate from \$2.00 to \$2.50.

It is very encouraging to note the good humor and good understanding with which our subscribers have accepted our necessary increase in price. Many have taken advantage of our renewal offer at the old rate, and many others have been sending \$3 during December, as if the rate were advanced at once. All such are given the full worth of their subscription at the old rate.

FRAUDULENT SOLICITORS

A superintendent of nurses in New York City writes us that she gave her JOURNAL subscription to an unknown agent and that she has not received her magazine. As the man is unknown to us, it is probable that he is another of the imposters who go about to training schools representing themselves as agents and pocketing for their own use what is put in their hands. We wish that each alumnae association would appoint one representative to take JOURNAL subscriptions. Then the busy hospital people would not be losing money in this way. A word to the wise should be sufficient.

ALUMNAE SUBSCRIPTIONS

A still better suggestion is that each alumnae association which finds the JOURNAL of value should include the subscription price in its association dues, as Miss Fulmer of Illinois, and Miss Greaney and Mrs. Roth of Pennsylvania suggest should be done as a memorial to Miss Palmer.

May we quote Miss Palmer's own words on this subject at the last convention she attended?—that at Cleveland, in 1918:

I have often said that I do not want any kind of memorial or any sort of effort made to show honor for me after I pass away. With the exception of six months, a few years ago, when I took time to have a little illness, I have been in some kind of nursing work for forty-one years, and I think that beats the record of anybody here.

I want as my memorial for the work that I have done as a pioneer in this country, in helping to establish training schools where there were none, in helping to organize the League and the American Nurses' Association, and in helping to obtain state registration and to create this magazine, to see before I die the Journal included in the alumnae dues, as a matter of routine, and in the hands of every member of every association in this country. This is what I ask you to do for me, and do it now, so that I may have the pleasure of knowing that it is done.

This living memorial to Miss Palmer was accomplished only in part during her lifetime, by Alabama, Oklahoma, a large portion of Pennsylvania, and for a time by South Dakota. Who will add to this memorial now?

JOURNAL ADVERTISERS

A large majority of the hospital superintendents of the country are women, and they have in their hands the purchasing of supplies for their institutions. We wish to ask all such whether they will cooperate with the JOURNAL to increase still further the value of its advertising pages. First, when some new appliance is to be purchased, look through the JOURNAL advertising section and see whether it is to be found there. If it is, make that firm one of those to whom

you write, and be sure to say you are doing so because you saw its advertisement in the JOURNAL. Second, if there is some very good and helpful appliance in use in your hospital or school, which is not advertised in the JOURNAL,—write and tell us what it is and where you get it,—then write the firm and ask them why they do not advertise in the JOURNAL, which is the official organ of the American Nurses' Association and of the National League of Nursing Education. Even a letter of inquiry about an advertisement is a help to the magazine in which that advertisement has appeared, if it is mentioned by name, because it shows the advertiser that these pages are read by those who are in the habit of making purchases. We shall be very greatly obliged for help of this kind.

ADDRESSES WANTED

Will "L. M. F.," who wrote a Letter to the Editor, published in the JOURNAL of May, 1920, send us her full name and address? We have mislaid these and are unable to forward a communication which has been sent to us for her.

An "anxious mother" asks for the address of a nurse, Miss Daly, who was on duty at Dartford, England, during the early part of October, 1918. Information is requested concerning Private Patrick J. Devanney, Co. E, 308th Infantry, a patient there, at that time. He has not been heard from for two years. Any nurse who may have knowledge of him is asked to communicate with his mother, Mrs. Sarah Devanney, 376 East 143rd Street, New York.

SOME OBLIGATIONS OF THE LATTER-DAY NURSE

"The Alumnae," a monthly paper published by St. Luke's Alumnae Association of Chicago, has in its November issue an excellent article on the above subject by Harriet Fulmer. Her suggestions, abridged, are as follows:

1. To enter the training school of her choice, looking upon it as an educational institution.
2. During her student term, to find out all she can about the various branches of nursing and to fit herself for her specialty.
3. To make herself familiar with registration and to become a registered nurse.
4. To join her alumnae association on graduation, becoming at the same time a member of district, state and national.
5. To subscribe to and read professional journals. (Those suggested are The American Journal of Nursing and the Public Health Nurse.)
6. To help maintain the Nurses' Relief Fund. (Miss Fulmer names also the Nightingale Fund, now completed, and the Isabel Hampton Robb Memorial Fund. This latter fund welcomes subscriptions but does not seek them.)